

Exhibit 29

O.T. TREATMENT RECORD & PROGRESS NOTE, Week Ending:

Codes	Dates of Service →				12/10	Date Plan Established
97010	Hot / cold pack				X	12/10/10
97014	Electrical Muscle Stimulation				X	Month/Year DEC 2010
97035	Ultrasound(each area)				X	Last Name
97033	Iontophoresis (15 min. each)					
97018	Paraffin Bath					
97034	Contrast Bath					
97022	Whirlpool					
90901	Biofeedback					
97016	Vasopneumatic Therapy					Date of Birth
97140	Manual Therapy				X	Sex M
97124	Massage					Diagnosis
97112	Neuromuscular Re-education					CERVICAL STRAIN, L SCAPULAR INSTABILITY, L SHOULDER STRAIN
97530	Transfer/Bed Mob Training					Physician
97116	Gait Training					Dr. WEINGARTEN
97110	Therapeutic Exercise 15 min				X	Insurance
97110-1	Therapeutic Ex Add 15 min					Co-Insurance
97704	Orthotic Training 15 min					Therapist
97520	Prosthetic Training 15 min					Treatment:
97012	Traction Mechanical					As per POC
97542	W/C Management					
97003	OT Evaluation				X	
97004	OT Re-evaluation					
95831	Manual Muscle testing					
95851	ROM Measurement					
97532	Cognitive Skills Training					
97530	Therapeutic Activities					
97535	Self Care Mngmnt Training				X	
	Splint Education					
	Splint charge					
	Therapist Initials					

Assessment: (in SOAP format)

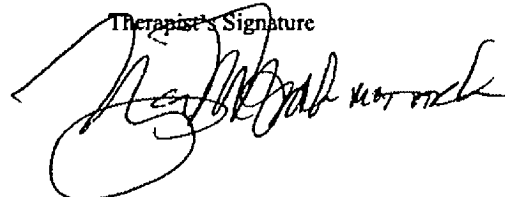
S: Patient states: " I am stiff and sore in my neck and shoulders, I have a lot of headaches" Pain level in CS 7-8/10 on 0-10 scale.

O: Patient was evaluated in 30 min and POC established. Patient received 1 tx sessions this week with the following modalities: IFC with MHP to CS, STM with MFR to CS, jt mobs with grade 1 & 2 to CS, US to CS/trapezius msl groups 1 mhz w/cm2. Patient fn status is as follows: Tenderness at CS 4-/5on 0-5 scale. Spasm at B upper & lower Trapezius is 4/5 at 0-5 scale. Manual ms strength at C.S 2+/5 on 0-5 scale. Endurance poor+. Pt is unable to cook and clean the house, c/o pain mod/max difficulty during dressing and grooming, unable to sleep on sides >5min, sit to watch TV >10 min. ADL task Feeding independent, Grooming max-mod A, Washing UB max A- mod A, LB mod A- min A, Dressing UB mod A, LB mod A- min A, Toileting independent, c/o pain during Bed mobility & transfers, ADL transfer sit to stand, tub - Independent. Pt is unable to look up, down & around .Demo with HEP.

A: Patient demo with dec pain, tend in neck msls this week. Patient needed frequent rest breaks in between tx sessions.

Tolerated tx well with min- mod discomfort.

P: Continue with POC to achieve set goals.

Therapist's Signature


P.T. TREATMENT RECORD & PROGRESS NOTE, Week Ending:

Codes	Dates of Service →					12/10	Date Plan Established
97010	Hot / cold pack					X	12/10/2010
97014	Electrical Muscle Stimulation						Month/Year DEC /2010
97035	Ultrasound(each area)						Last Name
97033	Iontophoresis (15 min. each)						
97018	Paraffin Bath						
97022	Whirlpool						
90901	Biofeedback						Date of Birth Sex
97140	Manual Therapy						MALE
97124	Massage						Diagnosis
97112	Neuromuscular Re-education						LUMBAR STRAIN
97530	Transfer/Bed Mob Training						Physician
97116	Gait Training						DR SAUL WEINGARDEN M.D
97110	Therapeutic Exercise 15 min						Insurance
97110-1	Therapeutic Ex Add 15 min						Co-Insurance
97703	Orthotic Training 15 min						Therapist
97012	Traction Mechanical						Treatment:
97542	W/C Propulsion/Management						As per POT
97002	PT Re-evaluation						
95831	Manual Muscle testing						
95851	ROM Measurement						
97001	PT Evaluation					X	
	Therapist Initials						

Assessment: (in SOAP format)

S: pt is in the pain on his Lower back.

Pain level: Lumbar Spine 8/10 on 0-10 scale.

O: Patient received 1 tx session this week with the following modalities.

MHP to LS for 15 min, .

FN status: pain level at Lumbar is about 8/10 on 0/10 scale. The tenderness is about 4/5 On 0/5 scale @ Lumbar. Spasm is about 4/5 on 0-5 scale. AROM at Lumbar is restricted due to pain. MMT is about 3-/5 on 0-5 scale. Endurance is fair- .Balance static/dynamic :good .Patient has max pain with walking for > 10-15 mts. Pt has max difficulty with going up and down ,max difficulty with getting from a low height chair ,mod difficulty with going in and out of car also mod difficulty with bed mobility, moderate difficulty with grooming ,dressing and max difficulty with over the head activities.pt has max difficulty to reach to floor to pick up an object due to pain.pt cannot lie on stomach /back for 10 -15 mts and max/mod diff with sitting and standing for >10-15 mts. patient has mod difficulty with looking up and down , max difficulty with reaching behind back .HEP is given and bed mobility and safety exercises were thought.

A: Evaluation has done on the lower back

P: Continue with POC to decrease the pain and increase the ROM and Strength.

Therapist Signature

O.T. TREATMENT RECORD & PROGRESS NOTE, Week Ending:**22-C415-636**

Codes	Dates of Service →				12/17	Date Plan Established
97010	Hot / cold pack				X	12/10/10
97014	Electrical Muscle Stimulation				X	Month/Year DEC 2010
97035	Ultrasound(each area)				X	Last Name
97033	Iontophoresis (15 min. each)					
97018	Paraffin Bath					
97034	Contrast Bath					
97022	Whirlpool					
90901	Biofeedback					Date of Birth Sex
97016	Vasopneumatic Therapy					M
97140	Manual Therapy				X	
97124	Massage					Diagnosis
97112	Neuromuscular Re-education					CERVICAL STRAIN, L SCAPULAR INSTABILITY, L SHOULDER STRAIN
97530	Transfer/Bed Mob Training					Physician
97116	Gait Training					Dr. WEINGARTEN
97110	Therapeutic Exercise 15 min				X	Insurance
97110-1	Therapeutic Ex Add 15 min					
97704	Orthotic Training 15 min					Co-Insurance
97520	Prosthetic Training 15 min					
97012	Traction Mechanical					Therapist
97542	W/C Management					Treatment:
97003	OT Evaluation					As per POC
97004	OT Re-evaluation					
95831	Manual Muscle testing					
95851	ROM Measurement					
97532	Cognitive Skills Training					
97530	Therapeutic Activities					
97535	Self Care Mngmnt Training				X	
	Splint Education					
	Splint charge					
	Therapist Initials					

Assessment (In SOAP format)

S: Patient states: "I am ok, doing my best" Pain level in CS 7-8/10 on 0-10 scale.

O: Patient received 1 tx sessions this week with the following modalities: IFC with MHP to CS, STM with MFR to CS, jt mobs with grade 1 & 2 to CS, US to CS/trapezoid msl groups 1 mhz w/cm2. Patient fn status is as follows: Tenderness at CS 4-/5 on 0-5 scale. Spasm at B upper & lower Trapezius is 4/5 at 0-5 scale. Manual ms strength at C.S 2+/5 on 0-5 scale. Endurance poor+/fair-. Pt is unable to cook and clean the house, c/o pain mod/max difficulty during dressing and grooming, unable to sleep on sides >5min, sit to watch TV >10 min. ADL task Feeding independent, Grooming max-mod A, Washing UB mod A, LB mod A- min A, Dressing UB mod A, LB mod A- min A, Toileting independent, c/o pain during Bed mobility & transfers, ADL transfer sit to stand, tub - Independent. Pt is unable to look up, down & around .Demo with HEP. Pt educated on cervical and UE stretches to decrease pain and stiffness, pt able to demo all stretches and added to HEP

A: Patient demo with dec pain, tend in neck msls this week. Patient needed frequent rest breaks in between tx sessions. Tolerated tx well with min- mod discomfort.

P: Continue with POC to achieve set goals.

P.T. TREATMENT RECORD & PROGRESS NOTE, Week Ending:

Codes	Dates of Service →					12/17	Date Plan Established 12/10/2010
97010	Hot / cold pack					X	Month/Year DEC/ 2010
97014	Electrical Muscle Stimulation					X	
97035	Ultrasound(each area)					X	
97033	Iontophoresis (15 min. each)						
97018	Paraffin Bath						
97022	Whirlpool						Last Name <div style="border: 1px solid black; width: 80px; height: 40px; margin: 5px;"></div>
90901	Biofeedback						
97140	Manual Therapy					X	Date of Birth Sex Male
97124	Massage						Diagnosis LUMBAR STRAIN
97112	Neuromuscular Re-education						
97530	Transfer/Bed Mob Training						
97116	Gait Training						
97110	Therapeutic Exercise 15 min					X	Physician Dr WEINGARDEN M.D
97110-1	Therapeutic Ex Add 15 min						
97703	Orthotic Training 15 min						Insurance
97012	Traction Mechanical						Co-Insurance
97542	W/C Propulsion/Management						
97002	PT Re-evaluation						
95831	Manual Muscle testing						Therapist
95851	ROM Measurement						
97001	PT Evaluation						
							Treatment: As per POT
	Therapist Initials						

Assessment: (in SOAP format)**S:** Pt feels little improvement on his lower back.

Pain level: Lumbar 7-8/10 on 0-10 scale.

O. Patient received 1 tx session this week with the following modalities.

IFC with MHP to LS for 15 min., thx us includes 1Mhz @ 1.3w/cm2 to his Lumbar for 8 mts .Therapeutic massage to Lumbar for 10-15 mts .Therapeutic exercises are given

FN status: pain level at Lumbar is about 7-8/10 on 0/10 scale and Tenderness is about 3+/5 on 0/5 scale. Spasm at Lumbar 4/5 on 0-5 scale. Arom @Lumbar spine is restricted moderately due to pain. MMT is about 3-/5 on 0-5 scale Endurance Fair- .Balance static/dynamic: sitting good. pt has mod difficulty to go up & down stairs, mod difficulty to get in & out of the car and bath tub patient has max difficulty to get up from the low height chair also has mod difficulty with bed mobility .Pt has max difficulty to sleep on stomach for >15 mts, max difficulty to sit for >10-15 mins and max difficulty to stand >10mt. pt has Max difficulty in walking more than 5-7 mins. Patient has max/mod difficulty to reach for an object from floor due to pain

A: Pt felt good and continue therapy protocols to bring the pain down.**P:** Continue with Skilled therapy to reach set goals.

Therapist Signature

P.T. TREATMENT RECORD & PROGRESS NOTE, Week Ending:

Codes	Dates of Service →	1/21					Date Plan Established 12/10/2010
97010	Hot / cold pack	X					Month/Year DEC/ 2010
97014	Electrical Muscle Stimulation	X					
97035	Ultrasound(each area)	X					Last Name <div style="border: 1px solid black; width: 80px; height: 40px; margin: 5px;"></div>
97033	Iontophoresis (15 min. each)						
97018	Paraffin Bath						Date of Birth Sex Male
97022	Whirlpool						
90901	Biofeedback						Diagnosis LUMBAR STRAIN
97140	Manual Therapy						
97124	Massage	X					
97112	Neuromuscular Re-education						
97530	Transfer/Bed Mob Training						Physician Dr WEINGARDEN M.D
97116	Gait Training						
97110	Therapeutic Exercise 15 min	X					Insurance
97110-1	Therapeutic Ex Add 15 min						
97703	Orthotic Training 15 min						Co-Insurance
97012	Traction Mechanical						
97542	W/C Propulsion/Management						Therapist
97002	PT Re-evaluation	X					
95831	Manual Muscle testing						Treatment: As per POT
95851	ROM Measurement						
97001	PT Evaluation						
	Therapist Initials						

Assessment: (in SOAP format)**S:** My lower back is sore

Lumbar 5/10 on 0-10 scale.

O. Patient received 1 tx session this week with the following modalities.

IFC with MHP to LS for 15 min., thx us includes 1Mhz @ 1.3w/cm2 to his Lumbar for 8 mts .functional massage to Lumbar for 10-15 mts .Therapeutic exercises are given

FN status: pain level at ls is about 5/10 on 0/10 scale and tenderness is about 3/5 on 0/5 scale. spasm at ls 4/5 on 0-5 scale. arom @ls is restricted mildly due to pain..muscle power is about 4-/5 on 0-5 scale endurance fair-. balance static/dynamic : good .. pt has mod difficulty to go up & down stairs ,mod difficulty to get in & out of the car .patient has mod difficulty to get up from the low height chair .also has min difficulty with bed mobility .pt has mod difficulty to sleep on stomach/back , for >30 mts, mod difficulty to sit for >30 mts and mod difficulty to stand for > 30 mt. patient has mod difficulty to reach for object from floor due to pain

A: patient came back to therapy after a month & is re evaluated needs more excs.**P:** Continue with Skilled therapy to reach set goals.

 Therapist Signature

O.T. TREATMENT RECORD & PROGRESS NOTE, Week Ending:

Codes	Dates of Service →					1/21	Date Plan Established
97010	Hot / cold pack					X	12/10/10
97014	Electrical Muscle Stimulation					X	Month/Year
97035	Ultrasound(each area)					X	DEC 2010
97033	Iontophoresis (15 min. each)						Last Name
97018	Paraffin Bath						
97034	Contrast Bath						
97022	Whirlpool						
90901	Biofeedback						Date of Birth
97016	Vasopneumatic Therapy						Sex
97140	Manual Therapy					X	M
97124	Massage						Diagnosis
97112	Neuromuscular Re-education						CERVICAL STRAIN, L
97530	Transfer/Bed Mob Training						SCAPULAR
97116	Gait Training						INSTABILITY, L
97110	Therapeutic Exercise 15 min					X	SHOULDER STRAIN
97110-1	Therapeutic Ex Add 15 min						Physician
							Dr. WEINGARTEN
97704	Orthotic Training 15 min						Insurance
97520	Prosthetic Training 15 min						
97012	Traction Mechanical						Co-Insurance
97542	W/C Management						
97003	OT Evaluation						Therapist
97004	OT Re-evaluation						
95831	Manual Muscle testing						Treatment:
95851	ROM Measurement						As per POC
97532	Cognitive Skills Training						
97530	Therapeutic Activities						
97535	Self Care Mngmnt Training					X	
	Splint Education						
	Splint charge						
	Therapist Initials						

Assessment (In SOAP format)

S: Patient states: " Pain level in CS 7/10 on 0-10 scale.

O: Patient received 1 tx sessions this week with the following modalities: IFC with MHP to CS, STM with MFR to CS, jt mobs with grade 1& 2 to CS, US to CS/trapezoid msl groups 1 mhz w/cm2. Bilateral shoulder wheel 10x 2 reps each, AROM exercises 10 x 2 reps each (all planes), Instruct with energy conservation and work simplification techniques, PRE's with yellow theraband bilateral shoulder/elbow flexion/extension.

A: Patient able to tolerate treatment well. Required frequent restbreaks between exercises. Demonstrated decreased pain tolerance at this time.

P: Continue with POC to achieve set goals.

W. J. Infante

22C415636

P.T. TREATMENT RECORD & PROGRESS NOTE, Week Ending:

Codes	Dates of Service →	1/28						Date Plan Established 12/10/2010
97010	Hot / cold pack	X						Month/Year DEC/ 2010
97014	Electrical Muscle Stimulation	X						
97035	Ultrasound(each area)	X						Last Name <div style="border: 1px solid black; width: 100px; height: 30px;"></div>
97033	Iontophoresis (15 min. each)							
97018	Paraffin Bath							Date of Birth Sex Male
97022	Whirlpool							
90901	Biofeedback							Diagnosis LUMBAR STRAIN
97140	Manual Therapy							
97124	Massage	X						
97112	Neuromuscular Re-education							
97530	Transfer/Bed Mob Training							Physician Dr WEINGARDEN M.D
97116	Gait Training							
97110	Therapeutic Exercise 15 min	X						Insurance
97110-1	Therapeutic Ex Add 15 min							
97703	Orthotic Training 15 min							Co-Insurance
97012	Traction Mechanical							
97542	W/C Propulsion/Management							Therapist
97002	PT Re-evaluation							
95831	Manual Muscle testing							Treatment; As per POT
95851	ROM Measurement							
97001	PT Evaluation							
	Therapist Initials							

Assessment: (in SOAP format)**S:** My lower back is stiff

Lumbar 5/10 on 0-10 scale.

O. Patient received 1 tx session this week with the following modalities.

IFC with MHP to LS for 15 min., thx us includes 1Mhz @ 1.3w/cm2 to his Lumbar for 8 mts .functional massage to Lumbar for 10-15 mts .Therapeutic exercises are given

FN status: pain level at ls is about 5/10 on 0/10 scale and tenderness is about 3/5 on 0/5 scale. spasm at ls 4/5 on 0-5 scale. arom @ls is restricted mildly due to pain..muscle power is about 4-/5 on 0-5 scale endurance fair-. balance static/dynamic : good .. pt has mod difficulty to go up & down stairs ,mod difficulty to get in & out of the car .patient has mod difficulty to get up from the low height chair .also has min difficulty with bed mobility .pt has mod difficulty to sleep on stomach/back , for >30 mts, mod difficulty to sit for >30 mts and mod difficulty to stand for > 30 mt. patient has mod difficulty to reach for object from floor due to pain

A: patient tolerated the treatment well**P:** Continue with Skilled therapy to reach set goals.

 Therapist Signature

O.T. TREATMENT RECORD & PROGRESS NOTE, Week Ending:

Codes	Dates of Service →					1/28	Date Plan Established
97010	Hot / cold pack					X	12/10/10
97014	Electrical Muscle Stimulation					X	Month/Year DEC 2010
97035	Ultrasound(each area)					X	Last Name
97033	Iontophoresis (15 min. each)						
97018	Paraffin Bath						
97034	Contrast Bath						
97022	Whirlpool						
90901	Biofeedback						Date of Birth Sex
97016	Vasopneumatic Therapy						M
97140	Manual Therapy					X	Diagnosis
97124	Massage						CERVICAL STRAIN, L
97112	Neuromuscular Re-education						SCAPULAR
97530	Transfer/Bed Mob Training						INSTABILITY, L
97116	Gait Training						SHOULDER STRAIN
97110	Therapeutic Exercise 15 min					X	Physician
97110-1	Therapeutic Ex Add 15 min						Dr. WEINGARTEN
97704	Orthotic Training 15 min						Insurance
97520	Prosthetic Training 15 min						
97012	Traction Mechanical						Co-Insurance
97542	W/C Management						
97003	OT Evaluation						Therapist
97004	OT Re-evaluation						
95831	Manual Muscle testing						Treatment:
95851	ROM Measurement						As per POC
97532	Cognitive Skills Training						
97530	Therapeutic Activities						
97535	Self Care Mngmnt Training					X	
	Splint Education						
	Splint charge						
	Therapist Initials						

Assessment (In SOAP format)

S: Patient states: " Pain level in CS 6-7/10 on 0-10 scale.

O: Patient received 1 tx sessions this week with the following modalities: IFC with MHP to CS, STM with MFR to CS, jt mobs with grade 1& 2 to CS, US to CS/trapezuis msl groups 1 mhz w/cm2. Bilateral shoulder wheel 10x 2 reps each, AROM exercises 10 x 2 reps each (all planes), Instruct with ADL compensatory techniques, PRE's with yellow theraband bilateral shoulder/elbow flexion/extension.

A: Patient able to tolerate treatment well. Required frequent restbreaks between exercises. Demonstrated decreased pain tolerance at this time.

P: Continue with POC to achieve set goals.

Nigel R. P. Mason

O.T. TREATMENT RECORD & PROGRESS NOTE, Week Ending:

Codes	Dates of Service →					2/9	Date Plan Established
97010	Hot / cold pack					X	12/10/10
97014	Electrical Muscle Stimulation					X	Month/Year DEC 2010
97035	Ultrasound(each area)					X	Last Name
97033	Iontophoresis (15 min. each)						
97018	Paraffin Bath						
97034	Contrast Bath						
97022	Whirlpool						
90901	Biofeedback						Date of Birth Sex
97016	Vasopneumatic Therapy						M
97140	Manual Therapy					X	
97124	Massage						Diagnosis
97112	Neuromuscular Re-education						CERVICAL STRAIN, L SCAPULAR INSTABILITY, L SHOULDER STRAIN
97530	Transfer/Bed Mob Training						Physician
97116	Gait Training						Dr. WEINGARTEN
97110	Therapeutic Exercise 15 min					X	Insurance
97110-1	Therapeutic Ex Add 15 min						
97704	Orthotic Training 15 min						Co-Insurance
97520	Prosthetic Training 15 min						
97012	Traction Mechanical						
97542	W/C Management						
97003	OT Evaluation						Therapist
97004	OT Re-evaluation						
95831	Manual Muscle testing						Treatment:
95851	ROM Measurement						As per POC
97532	Cognitive Skills Training						
97530	Therapeutic Activities						
97535	Self Care Mngmnt Training					X	
	Splint Education						
	Splint charge						
	Therapist Initials						

Assessment (In SOAP format)

S: Patient states: " Pain level in CS 6/10 on 0-10 scale.

O: Patient received 1 tx sessions this week with the following modalities: IFC with MHP to CS, STM with MFR to CS, jt mobs with grade 1& 2 to CS, US to CS/trapezuis msl groups 1 mhz w/cm2. Bilateral shoulder wheel 15x 2 reps each, AROM exercises 10 x 2 reps each (all planes), Review with ADL compensatory techniques, PRE's with green theraband bilateral shoulder/elbow flexion/extension, scapula stretches/PROM

A: Patient able to tolerate treatment well. Required frequent restbreaks between exercises. Demonstrated decreased pain tolerance at this time.

P: Continue with POC to achieve set goals.

Nyem Rutledge not ok

P.T. TREATMENT RECORD & PROGRESS NOTE, Week Ending:

Codes	Dates of Service →	02/09					Date Plan Established 12/10/2010
97010	Hot / cold pack	X					<u>Month/Year</u> DEC/ 2010
97014	Electrical Muscle Stimulation	X					
97035	Ultrasound(each area)	X					<u>Last Name</u> <div style="border: 1px solid black; width: 100px; height: 40px;"></div>
97033	Iontophoresis (15 min. each)						
97018	Paraffin Bath						<u>Date of Birth</u> <u>Sex</u> Male
97022	Whirlpool						
90901	Biofeedback						<u>Diagnosis</u> LUMBAR STRAIN
97140	Manual Therapy						
97124	Massage	X					
97112	Neuromuscular Re-education						
97530	Transfer/Bed Mob Training						<u>Physician</u> Dr WEINGARDEN M.D
97116	Gait Training						
97110	Therapeutic Exercise 15 min	X					<u>Insurance</u>
97110-1	Therapeutic Ex Add 15 min						
97703	Orthotic Training 15 min						<u>Co-Insurance</u>
97012	Traction Mechanical						
97542	W/C Propulsion/Management						<u>Therapist</u>
97002	PT Re-evaluation						
95831	Manual Muscle testing						<u>Treatment:</u> As per POT
95851	ROM Measurement						
97001	PT Evaluation						
	Therapist Initials						

Assessment: (in SOAP format)

S: am alright today

Lumbar 5/10 on 0-10 scale.

O. Patient received 1 tx session this week with the following modalities.

IFC with MHP to LS for 15 min., thx us includes 1Mhz @ 1.3w/cm2 to his Lumbar for 8 mts .functional massage to Lumbar for 10-15 mts .Therapeutic exercises are given

FN status: pain level at ls is about 5/10 on 0/10 scale and tenderness is about 3/5 on 0/5 scale. spasm at ls 3+/5 on 0-5 scale. arom @ls is restricted mildly due to pain..muscle power is about 4-/5 on 0-5 scale endurance fair-. balance static/dynamic : good .. pt has mod difficulty to go up & down stairs ,mod difficulty to get in & out of the car .patient has mod difficulty to get up from the low height chair .also has min difficulty with bed mobility .pt has mod difficulty to sleep on stomach/back , for >30 mts, mod difficulty to sit for >30 mts and mod difficulty to stand for > 30 mt. patient has mod difficulty to reach for object from floor due to pain

A: patient tolerated the treatment well & is better with the muscle spasm

P: Continue with Skilled therapy to reach set goals.


Therapist Signature

O.T. TREATMENT RECORD & PROGRESS NOTE, Week Ending:

Codes	Dates of Service →				2/17	Date Plan Established
97010	Hot / cold pack				X	12/10/10
97014	Electrical Muscle Stimulation				X	Month/Year DEC 2010
97035	Ultrasound(each area)				X	Last Name
97033	Iontophoresis (15 min. each)					<div style="border: 1px solid black; width: 100px; height: 40px; margin: 5px;"></div>
97018	Paraffin Bath					
97034	Contrast Bath					
97022	Whirlpool					
90901	Biofeedback					
97016	Vasopneumatic Therapy					Date of Birth
97140	Manual Therapy				X	Sex M
97124	Massage					Diagnosis CERVICAL STRAIN, L SCAPULAR INSTABILITY, L SHOULDER STRAIN
97112	Neuromuscular Re-education					
97530	Transfer/Bed Mob Training					
97116	Gait Training					
97110	Therapeutic Exercise 15 min				X	Physician
97110-1	Therapeutic Ex Add 15 min					Dr. WEINGARTEN
97704	Orthotic Training 15 min					Insurance
97520	Prosthetic Training 15 min					Co-Insurance
97012	Traction Mechanical					
97542	W/C Management					
97003	OT Evaluation					
97004	OT Re-evaluation					Therapist
95831	Manual Muscle testing					
95851	ROM Measurement					
97532	Cognitive Skills Training					
97530	Therapeutic Activities					Treatment: As per POC
97535	Self Care Mngmnt Training				X	
	Splint Education					
	Splint charge					
	Therapist Initials					

Assessment (In SOAP format)

S: Patient states: " Pain level in CS 5-/10 on 0-10 scale.

O: Patient received 1 tx sessions this week with the following modalities: IFC with MHP to CS, STM with MFR to CS, jt mobs with grade 1& 2 to CS, US to CS/trapezuis msl groups 1 mhz w/cm2. Bilateral shoulder wheel 15x 2 reps each, AROM exercises 10 x 2 reps each (all planes), Review with ADL compensatory techniques, PRE's with green theraband bilateral shoulder/elbow flexion/extension, scapula stretches/PROM

A: Patient able to tolerate treatment well. Required frequent restbreaks between exercises. Demonstrated decreased pain tolerance at this time.

P: Continue with POC to achieve set goals.

M. Rutledge

P.T. TREATMENT RECORD & PROGRESS NOTE, Week Ending:

Codes	Dates of Service →	02/17					
97010	Hot / cold pack	X					
97014	Electrical Muscle Stimulation	X					
97035	Ultrasound(each area)	X					
97033	Iontophoresis (15 min. each)						
97018	Paraffin Bath						
97022	Whirlpool						
90901	Biofeedback						
97140	Manual Therapy	X					
97124	Massage						
97112	Neuromuscular Re-education						
97530	Transfer/Bed Mob Training						
97116	Gait Training						
97110	Therapeutic Exercise 15 min						
97110-1	Therapeutic Ex Add 15 min						
97703	Orthotic Training 15 min						
97012	Traction Mechanical						
97542	W/C Propulsion/Management						
97002	PT Re-evaluation						
95831	Manual Muscle testing						
95851	ROM Measurement						
97001	PT Evaluation						
	Therapist Initials						

<u>Date Plan Established</u> 12/10/2010	
<u>Month/Year</u> DEC/ 2010	
<u>Last Name</u> <div style="border: 1px solid black; width: 100px; height: 40px;"></div>	
<u>Date of Birth</u>	<u>Sex</u> Male
<u>Diagnosis</u> LUMBAR STRAIN	
<u>Physician</u> Dr WEINGARDEN M.D	
<u>Insurance</u>	
<u>Co-Insurance</u>	
<u>Therapist</u>	
<u>Treatment:</u> As per POT	

Assessment: (in SOAP format)

S: My lower back is ok today, but my shoulders bothers me

Lumbar 5/10 on 0-10 scale.

O. Patient received 1 tx session this week with the following modalities.

IFC with MHP to LS for 15 min., thx us includes 1Mhz @ 1.2w/cm2 to his Lumbar for 8 mts .functional massage to Lumbar for 10-15 mts .Therapeutic exercises are given

FN status: pain level at ls is about 5/10 on 0/10 scale and tenderness is about 3/5 on 0/5 scale. spasm at ls 3+/5 on 0-5 scale. arom @ls is restricted mildly due to pain..muscle power is about 4-/5 on 0-5 scale endurance fair-. balance static/dynamic : good .. pt has mod difficulty to go up & down stairs ,mod difficulty to get in & out of the car .patient has mod difficulty to get up from the low height chair .also has min difficulty with bed mobility .pt has mod difficulty to sleep on stomach/back , for >30 mts, mod difficulty to sit for >30 mts and mod difficulty to stand for > 30 mt. patient has mod difficulty to reach for object from floor due to pain.patient refused to do exs on Thursday due to some other appointments

A: patient tolerated the treatment well

P: Continue with Skilled therapy to reach set goals.

O.T. TREATMENT RECORD & PROGRESS NOTE, Week Ending:

Codes	Dates of Service →				2/24	2/25	Date Plan Established
97010	Hot / cold pack				X	X	12/10/10
97014	Electrical Muscle Stimulation				X	X	Month/Year DEC 2010
97035	Ultrasound(each area)				X	X	Last Name
97033	Iontophoresis (15 min. each)						<div style="border: 1px solid black; width: 100px; height: 40px; margin: 5px;"></div>
97018	Paraffin Bath						
97034	Contrast Bath						
97022	Whirlpool						
90901	Biofeedback						Date of Birth
97016	Vasopneumatic Therapy						Sex M
97140	Manual Therapy				X	X	Diagnosis CERVICAL STRAIN, L SCAPULAR INSTABILITY, L SHOULDER STRAIN
97124	Massage						
97112	Neuromuscular Re-education						
97530	Transfer/Bed Mob Training						Physician Dr. WEINGARTEN
97116	Gait Training						
97110	Therapeutic Exercise 15 min				X	X	Insurance
97110-1	Therapeutic Ex Add 15 min						
97704	Orthotic Training 15 min						Co-Insurance
97520	Prosthetic Training 15 min						
97012	Traction Mechanical						Therapist
97542	W/C Management						
97003	OT Evaluation						Treatment: As per POC
97004	OT Re-evaluation						
95831	Manual Muscle testing						
95851	ROM Measurement						
97532	Cognitive Skills Training						
97530	Therapeutic Activities						
97535	Self Care Mngmnt Training				X	X	
	Splint Education						
	Splint charge						
	Therapist Initials						

Assessment (In SOAP format)

S: Patient states: " Pain level in CS 5/10 on 0-10 scale.

O: Patient received 2tx sessions this week with the following modalities: IFC with MHP to CS, STM with MFR to CS, jt mobs with grade 1& 2 to CS, US to CS/trapezuis msl groups 1 mhz w/cm2. Bilateral shoulder wheel 15x 2 reps each, AROM exercises 10 x 2 reps each (all planes, PRE's with green theraband bilateral shoulder/elbow flexion/extension, scapula stretches/PROM, established HEP

A: Patient able to tolerate treatment well. Required frequent restbreaks between exercises. Demonstrated decreased pain tolerance at this time.

P: Continue with POC to achieve set goals.

Ng M Rutledge MPT/OTK

P.T. TREATMENT RECORD & PROGRESS NOTE, Week Ending:

Codes	Dates of Service →	02/24	02/25				
97010	Hot / cold pack	X	X				
97014	Electrical Muscle Stimulation	X	X				
97035	Ultrasound(each area)	X	X				
97033	Iontophoresis (15 min. each)						
97018	Paraffin Bath						
97022	Whirlpool						
90901	Biofeedback						
97140	Manual Therapy	X	X				
97124	Massage						
97112	Neuromuscular Re-education						
97530	Transfer/Bed Mob Training						
97116	Gait Training						
97110	Therapeutic Exercise 15 min	X	X				
97110-1	Therapeutic Ex Add 15 min						
97703	Orthotic Training 15 min						
97012	Traction Mechanical						
97542	W/C Propulsion/Management						
97002	PT Re-evaluation						
95831	Manual Muscle testing						
95851	ROM Measurement						
97001	PT Evaluation						
	Therapist Initials						

Date Plan Established
12/10/2010

Month/Year
DEC/ 2010

Date of Birth Sex
Male

Diagnosis
LUMBAR STRAIN

Physician
Dr WEINGARDEN M.D

Insurance

Co-Insurance

Therapist

Treatment:
As per POT

Assessment: (in SOAP format)

S: My lower back pain is about 4-5 today

Lumbar 4-5/10 on 0-10 scale.

O. Patient received 2 tx session this week with the following modalities.

IFC with MHP to LS for 15 min., thx us includes 1Mhz @ 1.2w/cm2 to his Lumbar for 8 mts .functional massage to Lumbar for 10-15 mts .Therapeutic exercises are given

FN status: pain level at ls is about 4-5/10 on 0/10 scale and tenderness is about 3/5 on 0/5 scale. spasm at ls 3+/5 on 0-5 scale. arom @ls is restricted mildly due to pain..muscle power is about 4-/5 on 0-5 scale endurance fair-. balance static/dynamic ; good .. pt has mod difficulty to go up & down stairs ,mod difficulty to get in & out of the car .patient has mod difficulty to get up from the low height chair .she has min difficulty with bed mobility .pt has mod difficulty to sleep on stomach/back , for >30 mts, mod difficulty to sit for >30 mts and mod difficulty to stand for > 30 mt. patient has mod difficulty to reach for object from floor due to pain.

A: patient tolerated the treatment well & is better with the pain level

P: Continue with Skilled therapy to reach set goals.

2nd P. 26

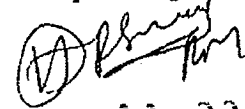
PT TREATMENT LOG AND PROGRES NOTE

Codes	Dates of Service →	8/15	8/16	8/17	8/18	8/19	Date Plan Established
97010	Hot / cold pack	X		X		X	8/5/2011
97032	Electrical Muscle Stimulation	X		X		X	Month/Year 8/2011
97035	Ultrasound(each area)						Last Name
97033	Iontophoresis (15 min. each)						
97018	Paraffin Bath						
97022	Whirlpool						
90901	Biofeedback						Date of Birth Sex
97140	Manual Therapy	X		X		X	F
97124	Massage						Diagnosis
97112	Neuromuscular Re-education						LUMABR STRAIN
97530	Transfer/Bed Mob Training						
97116	Gait Training	X		X		X	Physician
97110	Therapeutic Exercise 15 min	X		X		X	. LEWERENZ, DO
97110-1	Therapeutic Ex Add 15 min						Insurance
97703	Orthotic Training 15 min						Co-Insurance
97012	Traction Mechanical						
97542	W/C Propulsion/Management						
97002	PT Re-evaluation						Therapist
95831	Manual Muscle testing						Treatment:
95851	ROM Measurement						As per POC
97001	PT Evaluation						
	Therapist Initials	BIM	10M	16M			

Assessment (SOAP format)

S: Pt reports LB pain 8/10, (B) LE pain 9/10 with tingling and numbness radiating to ankles.
O: Pt received 3 tx session this week with the following modalities: MHP/EMS to LB x 20 min; STM to LB x 15 min; ther exc to include: gait training x 10 min, balance training x 10 min; (B) squats, HS curls, heel raises, hip ABD/ADD, sit to stand all performed with use of walker for balance x 10 min. Pt's functional status is as follows Tenderness at R quadriceps 4/5, R hip 3/5, para spinals 3/5 on 0-5 scale. Pt demo severe difficulty ambulating > 115 feet and requires use of rolling walker w/seat. Pt has severe limitations asc/desc stairs and requires assist x 1 to complete. Pt has max difficulty standing from low height chair and requires use of arm rest to stand. Static balance in standing Poor; Dynamic balance in standing Poor; Static balance in sitting Fair; Dynamic balance in sitting Fair. Pt c/o max difficulty w/bed mobility and waking 2-3 times per night due to pain. Pt has sever-maxc difficulty standing > 3 min w/out LOB or sitting > 10 min w/out inc pain. Pt endurance for activities Poor. Pt demo confusion when discussing past medical history. Pt requires assist x 1 with all activities at this time.
A: Pt demo improved functional mobility. Pt tol session fair and required frequent rest periods.
P: Continue with skilled therapy per POC to achieve set goals.

Brenda Meyers, PA
Therapist's Signature



11-22-2011

O.T. TREATMENT RECORD & PROGRESS NOTE

Codes	Dates of Service →	8/15	8/17	8/19	Date Plan Established 8/05/2011
97010	Hot / cold pack	X	X	X	Month/Year AUGUST 2011
97014	Electrical Muscle Stimulation	X	X	X	
97035	Ultrasound(each area)				Last Name <div style="border: 1px solid black; width: 100px; height: 40px;"></div>
97033	Iontophoresis (15 min. each)				
97018	Paraffin Bath				Date of Birth Sex FEMALE
97034	Contrast Bath				
97022	Whirlpool				Diagnosis CERVICAL STRAIN R/O RADICULOPATHY. THORACIC STRAIN. DECREASED ADLS
90901	Biofeedback				
97016	Vasopneumatic Therapy				Physician Dr. LEWERENZ
97140	Manual Therapy				
97124	Massage	X	X	X	Insurance
97112	Neuromuscular Re-education				
97530	Transfer/Bed Mob Training				Co-Insurance
97116	Gait Training				
97110	Therapeutic Exercise 15 min	X	X	X	Therapist
97110-1	Therapeutic Ex Add 15 min				
97704	Orthotic Training 15 min				Treatment: As per POT
97520	Prosthetic Training 15 min				
97012	Traction Mechanical				Splint Education
97542	W/C Management				
97003	OT Evaluation				Splint charge
97004	OT Re-evaluation				
95831	Manual Muscle testing				Therapist Initials
95851	ROM Measurement				
97532	Cognitive Skills Training				
97530	Therapeutic Activities				
97535	Self Care Mngmnt Training	X	X	X	

Assessment: (in SOAP format)

S: Patient states: "I'm very sore, I have a black eye and I don't know how I got it" Pain level in CS 7/10 on 0-10 scale.

O: Patient received 3 tx sessions this week with the following modalities: IFC with MHP to CS. STM with MFR to CS. Cervical AROM and stretches 10 x 2 reps each. Bil UE AROM and stretches 10x 2 reps each. Shoulder wheel 10x2 reps. wall walks and wall pulley 10 x2 reps each to increase ROM and decrease pain and stiffness. PRE with yellow theraband bilateral shoulder. elbow flex/ex/abd/add. Instruct with ADL compensatory techniques to reduce pain and stiffness. Pt continues to need min/mod verbal cues to redirect complete tasks.

A: Patient demo with dec pain. tend in neck and shoulder msls this week. Patient needed frequent rest breaks in between tx sessions. Tolerated tx well with min discomfort.

P: Continue with POC to achieve set goals.

Angela Zepher COTA
Therapist's Signature

John M. Rutledge M.D.

08 01 24 2012

P.T. TREATMENT RECORD & PROGRESS NOTE

Codes	Dates of Service →	5/2	5/3	5/4	5/5	5/6	Date Plan Established
97010	Hot / cold pack	X		X	X		4/11/2011
97032	Electrical Muscle Stimulation	X		X	X		Month/Year 5/2011
97035	Ultrasound(each area)	X		X	X		Last Name
97033	Iontophoresis (15 min. each)						
97018	Paraffin Bath						
97022	Whirlpool						
90901	Biofeedback						Date of Birth Sex
97140	Manual Therapy	X		X	X		M
97124	Massage						Diagnosis
97112	Neuromuscular Re-education						WHIPLASH/UPPER THORACIC/LS STRAIN
97530	Transfer/Bed Mob Training						Physician
97116	Gait Training						SEAN J HOBAN, MD
97110	Therapeutic Exercise 15 min	X		X			Insurance
97110-1	Therapeutic Ex Add 15 min						Co-Insurance
97703	Orthotic Training 15 min						Therapist
97012	Traction Mechanical						Treatment:
97542	W/C Propulsion/Management						As per POC
97002	PT Re-evaluation						
95831	Manual Muscle testing						
95851	ROM Measurement						
97001	PT Evaluation						
	Therapist Initials						

Assessment (SOAP format)

S: Pt reports LB pain 7/10 on 0-10 scale.

O: Pt received 3 tx sessions this week with the following modalities: MHP/EMS to LB x 20 min; STM to LB x 15 min. Therapeutic exercises: core strengthening x 5 min, hip add/abd x 10 reps x 1 set, heel to toe x 10 reps x 1 set, marching in sitting and standing x 10 reps x 1 set, trunk ROM. Pt's functional status is as follows: Tenderness at, para spinals 3+/5 on 0-5 scale. Pt reports LB spasms 4/5 after prolonged activity. Pt has mod difficulty ambulating > 135 feet; mod difficulty asc/desc stairs; mod difficulty sitting > 10 min and standing > 10 min. Pt has mod difficulty w/over head reaching; bathing/grooming due to pain. Pt demo severe limitations w/trunk flex/ext and lifting objects > 5#. Pt has severe limitations w/bed mobility due to pain and c/o waking 3-4 times per night.

A: Pt demonstrated decrease tenderness and tol sessions well.

P: Continue with skilled therapy per POC to achieve set goals.

Brenda Meyers, PTA
Therapist's Signature

[Handwritten Signature]
- PPT

O.T. TREATMENT RECORD & PROGRESS NOTE

Codes	Dates of Service →	5/2	5/4	5/6	Date Plan Established 4/11/2011
97010	Hot / cold pack	X	X	X	Month/Year 5/11
97014	Electrical Muscle Stimulation	X	X	X	
97035	Ultrasound(each area)	X	X	X	
97033	Iontophoresis (15 min. each)				Last Name <div style="border: 1px solid black; width: 100px; height: 30px;"></div>
97018	Paraffin Bath				
97034	Contrast Bath				
97022	Whirlpool				Date of Birth Sex MALE
90901	Biofeedback				
97016	Vasopneumatic Therapy				
97140	Manual Therapy	X	X	X	Diagnosis WHIPLASH, CERVICAL STRAIN
97124	Massage				
97112	Neuromuscular Re-education				
97530	Transfer/Bed Mob Training				Physician Dr. SEAN HOBAN
97116	Gait Training				
97110	Therapeutic Exercise 15 min	X	X	X	
97110-1	Therapeutic Ex Add 15 min				Insurance
97704	Orthotic Training 15 min				
97520	Prosthetic Training 15 min				
97012	Traction Mechanical				Co-Insurance
97542	W/C Management				
97003	OT Evaluation				
97004	OT Re-evaluation				Therapist
95831	Manual Muscle testing				
95851	ROM Measurement				
97532	Cognitive Skills Training				Treatment: As per POT
97530	Therapeutic Activities				
97535	Self Care Mngmnt Training	X	X	X	
	Splint Education				
	Splint charge				
	Therapist Initials				

Assessment: (in SOAP format)

S: Patient states: "I am ok today." Pain level in CS 7-8/10 on 0-10 scale.

O: Patient received 3 tx sessions this week with the following modalities: IFC with MHP to CS, STM with MFR to CS, jt mobs with grade 1 & 2 to CS, US to CS/trapezius msl groups 3.3 mhz w/cm2. Cervical stretches and AROM, Bilateral shoulder wheel 10x 1 reps each, AROM exercises 10 x 1 reps each (all planes), PRE's with yellow theraband bilateral shoulder/elbow flexion/extension. Instruct with ADL compensatory technique. Core strengthening exercises 10x.

A: Patient demo with dec pain, tend in neck and shoulder msls this week. Patient needed frequent rest breaks in between tx sessions. Tolerated tx well with min discomfort.

P: Continue with POC to achieve set goals.

Therapist's Signature

Angela Zappala COTAC
for Michael Lee MD DPT

O.T. TREATMENT RECORD & PROGRESS NOTE

Codes	Dates of Service →				9/01	9/02	Date Plan Established 9/01/2011
97010	Hot / cold pack				X	X	Month/Year SEPTEMBER 2011
97014	Electrical Muscle Stimulation				X	X	
97035	Ultrasound(each area)					X	Last Name <div style="border: 1px solid black; width: 100px; height: 30px;"></div>
97033	Iontophoresis (15 min. each)						
97018	Paraffin Bath						Date of Birth Sex FEMALE
97034	Contrast Bath						
97022	Whirlpool						Diagnosis CERVICAL STRAIN THORACIC STRAIN DISCOGENIC DISEASE
90901	Biofeedback						
97016	Vasopneumatic Therapy						Physician Dr. TERRY REZNICK
97140	Manual Therapy						
97124	Massage					X	Insurance
97112	Neuromuscular Re-education						
97530	Transfer/Bed Mob Training						Co-Insurance
97116	Gait Training						
97110	Therapeutic Exercise 15 min						Therapist
97110-1	Therapeutic Ex Add 15 min						
97704	Orthotic Training 15 min						Treatment: As per POT
97520	Prosthetic Training 15 min						
97012	Traction Mechanical						
97542	W/C Management						
97003	OT Evaluation				X		
97004	OT Re-evaluation						
95831	Manual Muscle testing						
95851	ROM Measurement						
97532	Cognitive Skills Training						
97530	Therapeutic Activities						
97535	Self Care Mngmnt Training				X		
	Splint Education						
	Splint charge						
	Therapist Initials						

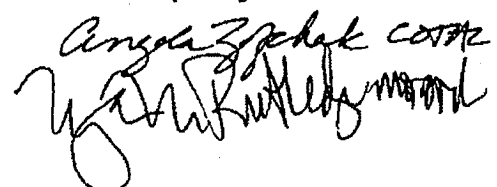
Assessment: (in SOAP format)

S: Patient states: "My shoulder and back are very sore, I barely can move at times." Pain level in CS/TS L Shoulder 7-8/10 on 0-10 scale.
 O: Patient was evaluated in 30 mins and POC established. Patient received 2 tx sessions this week with the following modalities: IFC with MHP to CS/TS & BIL Shoulder, STM with MFR to CS/TS & BIL Shoulder, US to CS/trapezius msl groups 3.3 mhz w/cm2. Patient fn status is as follows: Tenderness at CS/L Shoulder 4/5 on 0-5 scale. Spasm at B upper & lower Trapezius is 4/5 at 0-5 scale. Patient is currently experiencing pain in the neck and shoulder which she rates as a 7-8/10 intensity, with radiating pain down the L UE, decreased UE strength (L3+/5), ROM is limited in flex 140°, abd 120° with c/o pain and stiffness, she requires assistance with ADL's at times (SBA/min A) including basic meal prep and home maintenance, has difficulty with tasks which require overhead reaching/lifting, and she is experiencing some decreased endurance (endurance Fair) Patient also reports numbness and tingling down her L arm, which is having a negative effect on her GMC/FMC during daily tasks. Patient to benefit from OT to improve neck, shoulder, back, and UE strength, ROM, endurance, coordination, ADL ability, balance & safety awareness and to decrease pain. **SPECIAL TEST:** Cervical Compression test -ve
PRECAUTIONS: Patient is advised to avoid sudden jerky, twisting and turning neither movements at neck and spine, nor lift heavy weight at this time. Patient displays motivation to improve her current level of function to previous status and is a good candidate for skilled OT intervention.

A: Patient demo with dec pain, tend in neck and back msls week. Patient needed frequent rest breaks in between tx sessions. Tolerated tx well with min discomfort.

P: Continue with POC to achieve set goals.

Therapist's Signature



KMRPPT0051391

PT TREATMENT LOG AND PROGRES NOTE

Codes	Dates of Service →	8/29	8/30	8/31	9/1	9/2	Date Plan Established
97010	Hot / cold pack	X			X	X	8/29/2011
97032	Electrical Muscle Stimulation	X			X	X	Month/Year 8/2011
97035	Ultrasound(each area)	X			X	X	Last Name
97033	Iontophoresis (15 min. each)						
97018	Paraffin Bath						
97022	Whirlpool						
90901	Biofeedback						Date of Birth Sex
97140	Manual Therapy						
97124	Massage						Diagnosis
97112	Neuromuscular Re-education						LUMBAR STRAIN
97530	Transfer/Bed Mob Training						Physician
97116	Gait Training						TERRY REZNICK, DO
97110	Therapeutic Exercise 15 min						Insurance
97110-1	Therapeutic Ex Add 15 min						Co-Insurance
97703	Orthotic Training 15 min						Therapist
97012	Traction Mechanical						Treatment:
97542	W/C Propulsion/Management						As per POC
97002	PT Re-evaluation						
95831	Manual Muscle testing						
95851	ROM Measurement						
97001	PT Evaluation	X					
	Therapist Initials						

Assessment (SOAP format)

S: Pt reports pain in LB 8/10, pain in rhomboids 7/10 on 0-10 scale.

O: Pt was evaluated and POC established in 30 minutes. Pt received 1 tx session this week with the following modalities: MHP/EMS to LB x 20 min; STM to LB x 15 min; Ther US to LB x 8 min; ther exc to include: side bends, trunk ROM, seated trunk flex/ext and over head reach x 10 min. Pt's current level of function is as follows: Tenderness at para spinals is 3/5, lower trap 3/5, rhomboids 3/5 on 0-5 scale. Pt demo mod difficulty ambulating > 135 feet w/out inc pain. Pt demo mod difficulty asc/desc stairs/ standing from low height chair. Pt has max difficulty w/trunk flex and ext in standing. Pt demo mod difficulty w/trunk rotation due to pain. Pt demo mod difficulty w/reaching behind back. Pt is unable to touch toes at this time.

A: Pt tol sessions well.

P: Continue with skilled therapy per POC to achieve set goals.

Brenda Myers, PTA
Therapist's Signature

[Signature]
PTA

12-12-2011